



PART B - FEE(S) TRANSMITTAL

101195-4

BS

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7590

08/04/2003

Norris, McLaughlin & Marcus P. A.
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New York, NY 10017

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Nanci Manfredi (Depositor's name)
Nanci Manfredi (Signature)
October 30, 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/983,605	05/01/1998	MARION RODER	2936.104/00	1612

TITLE OF INVENTION: MICROSATELLITE MARKERS FOR PLANTS OF THE SPECIES TRITICUM AESTIVUM AND TRIBE TRITICEAE AND THE USE OF SAID MARKERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650	\$300	\$950	11/04/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHAKRABARTI, ARUN K	1634	536-023100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Norris McLaughlin &

1 Marcus

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Institut fur Pflanzengenetik
und Kulturpflanzenforschung

Gatersleben, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1263 (enclose an extra copy of this form).

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(Date)

10.31.03

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